

## FEE TRANSMITTAL FOR FY 2000

TOTAL AMOUNT OF PAYMENT (\$) 2,412.00

Complete if Known:

Application No. 08/94,466  
Filing Date September 30, 1997  
First Named Inventor Ahmad Zandi  
Group Art Unit 2723  
Examiner Name T. Johnson  
Attorney Docket No. 74451.P024C

### METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666  
Deposit Account Name \_\_\_\_\_

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

2. ☒ Payment Enclosed:  
☒ Check  
\_\_\_\_\_ Money Order  
\_\_\_\_\_ Other

### FEE CALCULATION

#### 1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Code	Fee (\$)	Code	Fee (\$)		
101	690	201	345	Utility application filing fee	<u>690.00</u>
106	310	206	155	Design application filing fee	<u>0</u>
107	480	207	240	Plant filing fee	<u>0</u>
108	690	208	345	Reissue filing fee	<u>0</u>
114	150	214	75	Provisional application filing fee	<u>0</u>
SUBTOTAL (1)					<u>\$ 690.00</u>

#### 2. EXTRA CLAIM FEES

			Extra Claims	Fee from below	Fee Paid
Total Claims	<u>37</u>	- 20** =	<u>17</u>	X <u>18.00</u>	= <u>306.00</u>
Independent Claims	<u>10</u>	- 3** =	<u>7</u>	X <u>78.00</u>	= <u>546.00</u>
Multiple Dependent					= <u>0</u>

\*\*Or number previously paid, if greater; For Reissues, see below.

Large Entity		Small Entity		Fee Description
Code	Fee (\$)	Code	Fee (\$)	
103	18	203	9	Claims in excess of 20
102	78	202	39	Independent claims in excess of 3
104	260	204	130	Multiple dependent claim, if not paid
109	78	209	39	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$ 852.00

01/10/2000

- 1 -

PTO/SB/17 (6/99)

Patent fees are subject to annual revisions. Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid.  
See Forms PTO/SB/09-12

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
<u>Fee Code</u>	<u>Fee (\$)</u>	<u>Fee Code</u>	<u>Fee (\$)</u>		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for response within first month	
116	380	216	190	Extension for response within second month	
117	870	217	435	Extension for response within third month	870.00
118	1,360	218	680	Extension for response within fourth month	
128	1,850	228	925	Extension for response within fifth month	
119	300	219	150	Notice of Appeal	
120	300	220	150	Filing a brief in support of an appeal	
121	260	221	130	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive unavoidably abandoned application	
141	1,210	241	605	Petition to revive unintentionally abandoned application	
142	1,210	242	605	Utility issue fee (or reissue)	
143	430	243	215	Design issue fee	
144	580	244	290	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	690	246	345	For filing a submission after final rejection (see 37 CFR 1.129(a))	
149	690	249	345	For each additional invention to be examined (see 37 CFR 1.129(a))	
Other fee (specify) _____					
Other fee (specify) _____					

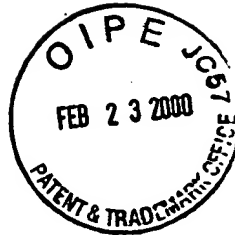
**SUBTOTAL (3) \$ 870.00**

\*Reduced by Basic Filing Fee Paid

**SUBMITTED BY:**Typed or Printed Name: Michael J. MallieSignature Date 2/23/00Reg. Number 36,591

Deposit Account User ID \_\_\_\_\_

(complete if applicable)



**EXPRESS MAIL CERTIFICATE OF MAILING**

"Express Mail" mailing label number: EL143555597US

Date of Deposit: February 23, 2000

I hereby certify that I am causing this paper or fee to be deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and that this paper or fee has been addressed to the Assistant Commissioner for Patents, Washington, D. C. 20231

Angela M. Quinn  
(Typed or printed name of person mailing paper or fee)

Angela M. Quinn  
(Signature of person mailing paper or fee)

2-23-00  
(Date signed)

RECEIVED  
FEB 28 2000  
TECH CENTER 2700

Serial/Patent No.: 08/941,466 Filing/Issue Date: 9/30/97  
Client: RICOH CORPORATION  
Title: METHOD FOR COMPRESSION USING REVERSIBLE EMBEDDED WAVELETS  
BSTZ File No.: 74451.P024C Atty/Secty Initials: MJM/amq  
Date Mailed: 2/23/00 Docket Due Date: 11/27/00

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

- |                                                                                                 |                                                                                      |                                                 |
|-------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Amendment/Response (____ pgs.)                                         | <input checked="" type="checkbox"/> Express Mail No. <u>EL143555597US</u>            | Check No. <u>33857</u>                          |
| <input type="checkbox"/> Appeal Brief (____ pgs.) (in triplicate)                               | <input checked="" type="checkbox"/> <u>3</u> Month(s) Extension of Time              | Amt: <u>1,542.00</u>                            |
| <input type="checkbox"/> Application - Utility (____ pgs., with cover and abstract)             | <input type="checkbox"/> Information Disclosure Statement & PTO 140 (____ pgs.)      | <input type="checkbox"/> Check No. <u>33858</u> |
| <input type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.)                    | <input type="checkbox"/> Issue Fee Transmittal                                       | Amt: <u>870.00</u>                              |
| <input type="checkbox"/> Application - Rule 1.53(b) Divisional (____ pgs.)                      | <input type="checkbox"/> Notice of Appeal                                            |                                                 |
| <input type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.)                             | <input checked="" type="checkbox"/> Petition for Extension of Time                   |                                                 |
| <input checked="" type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal ( <u>3</u> pgs.) | <input type="checkbox"/> Petition for _____                                          |                                                 |
| <input type="checkbox"/> Application - Design (____ pgs.)                                       | <input checked="" type="checkbox"/> Postcard                                         |                                                 |
| <input type="checkbox"/> Application - PCT (____ pgs.)                                          | <input type="checkbox"/> Power of Attorney (____ pgs.)                               |                                                 |
| <input type="checkbox"/> Application - Provisional (____ pgs.)                                  | <input type="checkbox"/> Preliminary Amendment (____ pgs.)                           |                                                 |
| <input type="checkbox"/> Assignment and Cover Sheet                                             | <input type="checkbox"/> Reply Brief (____ pgs.)                                     |                                                 |
| <input checked="" type="checkbox"/> Certificate of Mailing                                      | <input type="checkbox"/> Response to Notice of Missing Parts                         |                                                 |
| <input type="checkbox"/> Declaration & POA (____ pgs.)                                          | <input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business |                                                 |
| <input type="checkbox"/> Disclosure Docs & Orig & Copy of Inventor's Signed Letter (____ pgs.)  | <input type="checkbox"/> Transmittal Letter, in duplicate                            |                                                 |
| <input type="checkbox"/> Drawings: _____ # of sheets includes _____ figures                     | <input checked="" type="checkbox"/> Fee Transmittal, in duplicate                    |                                                 |

☐ Other: \_\_\_\_\_